Application Data Sheet Application Information

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

0

Number of copies of CDs::

0

Sequence submission?::

No

Computer Readable Form

No

(CRF)?::

Number of copies of CRF::

0

Title ::

PHONE HOLDER ASSEMBLY

Attorney Docket Number::

HRA-12807

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

Fig. 1

Total Drawing Sheets::

6

Small Entity?::

No

Latin name::

. Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent

No

Appl.?::

Applicant Information

Street of mailing address::

	Applicant Authority Type::	Inventor
	Primary Citizenship Country::	
	Status::	Full Capacity
	Given Name::	Neal
	Middle Name::	W.
	Family Name::	Luginbill
	Name Suffix::	
	City of Residence::	
	State or Province of Residence::	
á.	Country of Residence::	
	Street of mailing address::	
ų. Į	City of mailing address::	
der ten mil der der ten ten den de	State or Province of mailing address::	
	Country of mailing address::	
·	Postal or Zip Code of mailing address::	
	Applicant Authority Type::	Inventor
	Primary Citizenship Country::	
굨	Status::	Full Capacity
	Given Name::	Taro
	Míddle Name::	
	Family Name::	Shimokobe
	Name Suffix::	
	City of Residence::	
	State or Province of Residence::	•
	Country of Residence::	

	Postal or Zip Code of mailing address::	
	Applicant Authority Type:: Primary Citizenship Country::	Inventor
the first that the fi	Status:: Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence:: Street of mailing address:: City of mailing address:: City of mailing address:: Country of mailing address:: Postal or Zip Code of mailing address::	Full Capacity Yuri Starik
	Applicant Authority Type:: Primary Citizenship Country:: Status::	Inventor Full Capacity
	Given Name::	Marek

City of mailing address::

Middle Name:: Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of mailing address::

State or Province of mailing address::

Myszkowski

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Corres	pondence	Customer	Number	• •
				• •

0027505

Phone number::

216-566-9700

Fax Number:

216-566-9711

E-Mail address::

spaw@rankinhill.com

Representative Information

Representative Customer	0027505	
Number::		

- 1	Number::		002750	3				
	Domestic Priority Information							
5 1 2	Application::	Continuity 7	······	Parer	nt Application	ı:: F	Parent Filing [Date::
Foreign Priority Information								
حيرت ع	9	,						

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Honda Giken Kogyo Kabushiki Kaisha

Street of mailing address:: 1-1, Minamiaoyama 2-chome

City of mailing address:: Minato-ku, Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address::